

ABSTRACT

Purpose: The main aim of the study is to assess the facial nerve weakness following retromandibular transparotid approach after ORIF of subcondylar fractures.

Materials and methods: This was a prospective clinical trial . Five patients were included in the study. Retromandibular transparotid approach was used in all patients for ORIF of subcondylar fractures. The parameters assessed were Facial nerve weakness, Mouth opening, Occlusal discrepancy, Accessibility, Parotid fistulation and Scar assessment. Facial nerve weakness was assessed by House – Brackmann facial grading system.

Statistical analysis : SPSS version 16 .

Results: Five patients with displaced subcondylar fracture met the inclusion criteria . All patients were male with age group of 20-35 years . In two patients (40%) ,postoperative facial nerve weakness was evident at 24 hours after surgery. Facial nerve function was intact in all patients at 3 months with mean recovery period of 2 months. There was no significant difference between preoperative and postoperative facial nerve function. No permanent facial nerve paralysis was reported. No patients developed parotid fistulation. Four patients (80%) had inconspicuous scar at the end of 6 months.

Conclusion: The retromandibular transparotid approach is an effective and safe technique. This approach has excellent access, less morbidity to the facial nerve, provides good cosmetic results and patient satisfaction.

Key words: Transparotid approach, House-Brackmann facial grading system , Facial nerve paralysis.
